REDACTED - FOR PUBLIC INSPECTION Rate Floor Data

			DATA COLL	ECTION - OM	D CONTROL NUI	mber 3060-0986
Block	1 - Contact Inform	nation				
ROW#	DATA ELEMENT			FORMAT OF REQUESTED DATA		RESPONSE
1	Carrier Study Area Code			6 numeric digits	320801	
2	Carrier Study Area Name			alpha characters	CenturyTel of Odor	1
3	Service Provider Identification Number			9 numeric digits	143001750	
4	Residential Local Service Charge Effective Date			mm/dd/yyyy	6/1/2015	
5	Contact Name			alpha characters	Kenneth W. Buchar	n
6	Contact Telephone Number (include area code)			9 numeric digits	(318) 362-1538	-
7	Sheet number			numeric digit(s)	1	
8	Total Number of Sheets			numeric digit(s)	1	
	Column 1 Residential Local Service Charge	Column 2 State Subscriber Line Charge	Column 3 State Universal Service Fee	Column 4 Mandatory Extended Area Service Charge	Column 5 Loops	
9	\$ 14.25	\$ 4.78	\$ 0.07	NA		
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TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING RATE FLOOR DATA ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data										
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data reported; and, to the best of my knowledge, the information reported on this form is accurate.										
Name of Reporting Carrier: CenturyTel of Odd	n, Inc. d/b/a CenturyLink									
Signature of authorized officer Date (e////5										
Printed name of authorized officer David D. Cole										
Title or position of authorized officer Executive \	ice President of Operation	ns Support and Controller								
Telephone number of authorized officer: (318)	388 -9000, ext									
Study Area Code of Reporting Carrier	320801	Filing Due Date for this form (mm/dd/yyyy)	7/1/2015	Wild Control of the C						